X84=

+280=

TOTAL ADDIT. FEE

OR

X42=

+140=

Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

<u>`</u>							Pu	blication	or Do	cket Numl	ber	
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			THAN ENTITY	
то	TAL CLAIMS						RATE		RATE	FEE		
FOF	٦ ,		NUMBER F	ILED	NUMBE	R EXTRA	BASIC FEE 370.00		OR	BASIC FEE	770.88 740.00	
то:	TAL CHARGEA	BLE CLAIMS	5/, minu	us 20=	*		X\$ 9=	OR	X\$18=			
IND	EPENDENT CL	AIMS	√ min	us 3 =	*		X42=		OR	X84=		
MUI	TIPLE DEPEN	DENT CLAIM PI	RESENT				+140=	OR	+280=			
* If 1	the difference	in column 1 is	less than zer	TOTAL		OR	TOTAL	110				
		LAIMS AS A		OTHER THAN SMALL ENTITY OR SMALL ENTITY								
NT A	,	CLAIMS REMAINING AFTER PF		NUM PREVI	IEST IBER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	. Minus	**		=	X\$ 9=		OR	X\$18=		
MEN	Independent	*	Minus	***		=	X42=		OR	X84=		
Ā	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT CLAIM				+140=		OR	+280=		
	•				TOTAL ADDIT. FEE	TOTAL ADDIT. FEE						
		(Column 1)										
AENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	mn 2) HEST MBER IOUSLY OFOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
AMENDM	Independent	*	Minus	***		=	X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	+140=		OR	+280=						
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE					
			AUUII. FEE		-	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
-	10795000 4 44 07805	(Column 1) CLAIMS		HIG	ımn 2) HEST	(Column 3)		ADDI-	1		ADDI-	
DMENT C		REMAINING AFTER AMENDMENT		PREV	MBER TOUSLY D FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE	
ME	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE

OR ADDIT. FEE

OR ADDIT. FEE

TOTAL

OR ADDIT. FEE

OR ADDIT. FEE

TOTAL

OR ADDIT. FEE

OR ADDIT. FEE

OR ADDIT. FEE

TOTAL

ADDIT. FEE

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OR ADDIT. FEE

TOTAL

ADDIT. FEE

OR ADDIT. FEE

OR ADDIT. FEE

OR ADDIT. FEE

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TOTAL

OR ADDIT. FEE

OR

Independent

	_			- RE	OT AL	AH AF	UF.	COPY									
•	BEST AVAILABLE COL										Application or Docket Number						
•		PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999								D9-14-95-190							
		CLAIMS AS FILED (Column 1)					PART I (Column 2)				ENTITY	OTHER THAN OR SMALL ENTITY					
	FOR				RFILED	NUMBER EXTRA				TYPE RATE	FEE	1	RATE	FEE			
	BASIC FEE				<u>.</u>						345.00		TIATE	690.00			
	TOTAL CLAIMS				2 minus	20= •	0=1- 20/				0.00	OR		EMA			
				Jó	7		1			X\$ 9=		OR	X\$18=	5/10			
	INDEPENDENT CLAIMS			minus 3 =						X39=		OR	X78=	18			
	MU	LIPLE DEPEN	IDENT	CLAIM PRESENT				· · · · · · · · · · · · · · · · · · ·] [+130=		OR	+260=				
	• If	the difference	in colun	ımn 1 is less than zero, enter "0" in column 2				L	TOTAL	<u> </u>	οÃ	TOTAL	1244				
	CLAIMS AS AMENDED - PARTIL									• •		•	OTHER	THAN			
		1 7: 1-	(Colui				(Column 2) (Column			SMALL	ENTITY	OR	SMALL	ENTITY			
	⋖	17404		INING -		HIGHE	BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL			
	EN	30	AFT AMEND			PAEVIO PAID F		EXTRA] [TAIL	FEE		11/412	FEE			
	AMENDMENT	Total	. 5	<u> </u>	Minus	5	75	=	H	X\$ 9=	,	OR	X\$18=				
	AME	Independent	. ,	4	Minus	***	4	=	11	X39=		OR.	X78=				
	FIRST PRESENTATION OF MULTIPLE DE					PENDENT	CLAIM		J	+130=			+260=				
	95								L	TOTAL		OR	TOTAL				
									DDIT. FEE		OR	ADDIT. FEE					
			(Colui		227	(Column 2) (Column 3) HIGHEST) 1 r	. 	400		· · · · · · · · ·				
· · · · · · · · · · · · · · · · · · ·	EŅT B		REMA AFT AMEND			NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	ENDMENT	Total	•		Minus	**		=		X\$ 9=		OR'	-X\$18=_	بيتسينة			
	AME	Independent	•		Minus	***		2]	X39=		OR	X78=				
	~	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										UR					
		•				÷			L	+130=		OR	+260=				
										TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE				
	(Column 1) (Column 2) (Column 3								_	•			-				
	AMENDMENT C		CLAI REMAI AFT AMEND	INING ER		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	9	Total	•		Minus	**		=	1	X\$ 9=		OR	X\$18=				
	ME	Independent	•		Minus	***		=	1 F	X39=			X78=				
	⋖	FIRST PRESE	NTATION	OF MI	ILTIPLE DE	PENDENT	CLAIM		1	V72=		OR	A/8=				

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

TOTAL ADDIT. FEE OR ADDIT. I THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 12/99)

TOTAL ADDIT. FEE

+130=

TOTAL